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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒

Declaration
Submitted
with Initial
Filing

OR

☐

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

First Named Inventor

KINDNESS

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A COMBINATION AND METHOD USING EDTA, CYSTINE, ZINC AND SELENIUM FOR
ANTI-THROMBIN EFFECT AND FOR ANTI-PLATELET AGGREGATION AND MEASUREMENT OF
EFFICACY

(Title of the Invention)

the specification of which

☒

is attached hereto

OR

☐

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by
any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part
applications, material information which became available between the filing date of the prior application and the national or PCT
international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United
States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant
breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is
claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on
the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC
20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number or Bar Code Label  OR ☐ Correspondence address belowName **Brooke Schumm III** **25175**
PATENT TRADEMARK OFFICEAddress **Daneker, McIntire, Schumm et al, 210 N. Charles St.,**City **Baltimore**State **MD**ZIP **21201**Country **US**Telephone **410 649-4761**Fax **410 649-4756**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle (if any)) **George**Family Name
or Surname **KINDNESS**Inventor's
Signature *G. Kindness*Date *8 Jan 2002*Residence: City **Middletown**State **OH**Country **US**Citizenship **GB**Mailing Address **7207 Stonebrook Ct.**City **Middletown**State **OH**ZIP **45044**Country **US**NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle (if any)) **F. Timothy**Family Name
or Surname **GUILFORD**Inventor's
Signature

Date

Residence: City **Palo Alto**State **CA**Country **US**Citizenship **US**Mailing Address **829 Forest Ave.**City **Palo Alto**State **CA**ZIP **94301**Country **US**☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/01 (10-01)

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25175

PATENT, TRADEMARK OFFICE

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
NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) **George**Family Name
or Surname **KINDNESS**Inventor's
Signature

Date

Residence: City **Middletown**State **OH**Country **US**Citizenship **GB**Mailing Address **7207 Stonebrook Ct.**City **Middletown**State **OH**ZIP **45044**Country **US**NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any]) **F. Timothy**Family Name
or Surname **GUILFORD**Inventor's
Signature 

Date

1-8-02Residence: City **Palo Alto**State **CA**Country **US**Citizenship **US**Mailing Address **829 Forest Ave.**City **Palo Alto**State **CA**ZIP **94301**Country **US**☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → 

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Brooke		SCHUMM III	
Inventor's Signature <i>Brooke Schumm III</i>		Date <i>1/18/02</i>	
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Mailing Address 2813 Thornbrook Rd.			
Mailing Address			
City	Ellicott City	State	MD
ZIP	21042	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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